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CASE REPORT

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A CASE REPORT ON *TAMAKA SHWASA* SONALI SHARMA^{1*} RENU BALA² R. VIDYANATH³

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ABSTRACT:

Tamaka Shwasa may be correlated with Bronchial Asthma on the basis of its features & Etiopathogenesis. It is considered as *Yapya* (palliable) because this type of *Shwasa roga* is not only difficult to treat but also has a repetitive nature. In India bronchial asthma is major health problem and hyperventilation, cold air, tobacco smoke, dust, respiratory viral infections, emotional stress, aspirin, beta blockers are some of the triggering factors. The prevalence of Bronchial Asthma is about 300 million cases around the globe, and found in approximately 10% of children and youth below 18 years of age. The current statistical data reveals that the prevalence of Bronchial Asthma in the Middle East region is somewhat lower, varying between 5.6% in Saudi Arabia and 8.5% in Kuwait. In Iraq, approximately 200,000 patients per year with asthma are either hospitalized or treated in an Emergency room.

It is the need of the hour to find out a cost effective, therapeutically efficacious and safe herbal remedy for the management of bronchial asthma vis-à-vis *Tamaka Shwasa*. Keeping this in view the present study has been taken up and tried with a single drug *Bharangi* (*Clerodendrum serratum*) in the form of powder in a dose of 3 gms. after adding with equal amount of *Sunthi* (*Zingiber officinalis*) and administered internally with hot water twice a day after food and the results are encouraging.

Keywords: Tamaka Shwasa, Bronchial Asthma, Bharangi Churna, Sunthi Churna

INTRODUCTION

Based on the signs and symptoms of bronchial asthma it may be correlated with Tamaka Shwasa mentioned in literature of Ayurveda. Major signs and symptoms are dyspnoea, cough, chest tightness and wheezing, that vary over time and in intensity, together with variable expiratory airflow limitation .it results from narrowing of airways produced by combination of muscle spasm , mucosal oedema and viscid bronchial secretion ^[1]. A recent Indian Study on Epidemiology of Asthma, Respiratory Symptoms and Chronic Bronchitis (INSEARCH) done with 85.105 men and 84.470 women from 12 urban and 11 rural sites in India estimated the prevalence of asthma in India to be 2.05%^[2]. Keeping this in view after having a vivid search of Ayurvedic literature, Bharangi, a single drug recipe was selected and carries out the present study.

CASE REPORT

A male aged about 50 years suffering from bronchial asthma the past 15 years was

attended to the O.P.D, at Chandigarh. The symptoms are found like difficulty in breathing during night whenever he comes in contact with dust or paint and pollen. He is not having any other comorbidity except hypertension and continuing the medicine which was prescribed by his family doctor. .

Drug, Dosage and Duration

Equal quantity of *Bharangi* and *Sunthi Churna*^[3] was mixed together and administered internally in a dose of 3 gm. twice a day with warm water 1 hour after food for a period of three months.

Eucalyptus leaves are boiled in water and used as steam inhalation at bedtime^[4].

Observations

The symptoms like dyspnoea, cough , chest tightness and wheezing etc., are reduced 70 % and the drug is continued for a period of 3 months. By the end of the completion of the course, the patient got much relief and the duration of the asthmatic attacks are reduced and no adverse effects are seen.

Sr.no.	Name of symptoms	Before treatment	After treatment		
			1st	2nd	3rd
			month	month	month
1.	Dyspnoea	++++	++	+	-
2.	Cough	++++	+	+	-
3.	Chest tightness	++++	++	++	+
4.	Wheezing	++++	+++	+	+

DISCUSSION

It is observed that Bharangi (Clerodendrum serratum) possesses the chemical constituents like Phenolic glycoside, Saponin, Hispidulin, 7dglucudines and Scutellarun. Its roots contain various chemical compounds like saponin, D mannitol, Oceanic acid ,Steroidal glycosides, Ferulic acid, Arabinose ,Urologic acid. Research studies on Bharanai reveals that it has bronchodilator activity. The aqueous extracts of leaves of C. serratum possess bronchodilator, antibacterial, wound healing, anticarcinogenic, anti-inflammatory, antioxidant, antiangiogenic and vasorelaxant activities^[5]. Thus Bharangi has been selected and tried in this case and got satisfactory results. Even though in the classics Bharanai has been mentioned to be taken in the form of REFERENCES

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paste, in this study it is used in the powder form.

CONCLUSION

By the above observations, it can be concluded that *Bharangi Churna* can be used in *Tamaka Shwasa* as it easily available, cost effective and safer. However further clinical trials should be conducted on a large sample to come up with a final conclusion.

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